

State of Washington Application for a Water Right Please follow the attached instructions to avoid unnecessary delays.

THM CR# 239 For Ecology Use Fee Paid 10,00 Date _

Section 1. APPLICANT - PERSON, ORG	ANIZATION, OR WATER SYSTEM			
Name FORDYCE WATER ASSOCIATIO	N Home Tel:(569) 493 - 3545			
Mailing Address P.O. Box 288	Work Tel:() - SAME			
Mailing Address P.O. Box 288 City HUSUM State WA Zip+4 986	523 + FAX: (569) 493 - 3543			
Section 2. CONTACT - PERSON TO CA ☐ Same as above	LL ABOUT THE APPLICATION			
Name PAUL POKNIS	Home Tel:(504) 493 - 3545			
Mailing Address R.D. Rox 213	Work Tel:() - SAME			
City HUSUM StateWA Zip+4 981	23 + FAX: (509) 493 - 3543			
Mailing Address R.D. Box 213 City HUSUM State JA Zip+4 981 Relationship to applicant president				
Section 3. STATEMENT OF INTENT				
The applicant requests a permit to use not more than cubic feet per second) from a □ surface water source of purpose(s) of description of the place of use. (See instructions.) NOTE	ground water source (check only one) for the Attach a "legal"			
Estimate a maximum annual quantity to be used in acre-fee	et per year: don't Kow			
From/ to/ Section 4. WATER SOURCE	DEPARTMENT OF ECOLOGY			
If SURFACE WATER	II GROUNDWATER			
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: Number of diversions:	A permit is desired for <u>one</u> well(s). Application is for "emergency" use of well #1. We correctly use well #2.			
Source flows into (name of body of water):	Size & depth of well(s):			
	8" x 145'			
LOCATION				
Enter the north-south and east-west distances in feet nearest section corner: 950 Hr soll and 1664, west 7				
4 of 4 of Section Township Range(E/W	If location of source is platted, complete below:			
	Lot Block Subdivision			
NE NE 2 3 IOE	KI'8K49			
	Dept. Of Health #			

ECY 040-1-14 Rev. 12/94 F

APPLICATION

6-4-32 639 Appl. No.:

A.	Name of system, if named: FORDYCE WATER SYSTEM
B.	Briefly describe your proposed water system. (See instructions.)
	See attacked sheet
	Le and read sheet
C.	Do you already have any water rights or claims associated with this property or system? \square YES \square NO PROVIDE DOCUMENTATION. \square
Sec	tion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION
	ampleted for all domestic/public supply uses)
Α.	Number of "connections" requested: Are you within the area of an approved water system? Type of connection (Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? (Homes, Apartment, Recreational, etc.)
Б,	If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Com	plete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the
	Washington State Department of Health? ✓ YES □ NO
	If yes, when was it approved? 6 11 93 Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? $\sqrt{2} \sqrt{9} \sqrt{9}$ Please attach the current approved version of your plan.
Sec	tion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION
	omplete for all irrigation and agriculture uses.)
Α.	Total number of acres to be irrigated:
В.	
D.	List total number of acres for other specified agricultural uses:
	UseAcres UseAcres
	UseAcres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)
	Add up the acreage in which you have a controlling interest, including only:
	‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application;
	‡ Acreage proposed to be irrigated under other pending application(s).
	1. Is the combined acreage greater than 2000 acres? □ YES □ NC
	2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below)
	Dairy - # Milking # Non-milking

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

YES - NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

Α.	Does the applicant If no, explain the applicant owner(s):			and address(es) or	YES D NO
		*			
					3.1

B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

YES - NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

Date

Landowner for place of use (if same as applicant, write "same")

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
Section number(s)is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

Ecology staff______ Date____